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26111 7590 06/03/2009

STERNE, KESSLER, GOLDSTEIN & FOX P.L.L.C 1100 NEW YORK AVENUE, N.W. WASHINGTON, DC 20005

Alexandria, Virginia 22313-1450 (571) 273-2885

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09/03/2009

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/586,491	07/20/2006	Thomas HIMMLER	2400.0650000/JMC/CMB	4187

APPLN, TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE nonprovisional \$1,510 \$300 \$1.810

EXAMINER ARTUNIT CLASS-SUBCLASS Solola, Taofiq A. 1625 562-406000 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list (1) the 1. STERNE, KESSLER, GOLDSTEIN & CFR 1.363). names of up to 3 registered patent attorneys or FOX P.L.L.C. agents OR, alternatively, (2) the name of a single [] Change of correspondence address (or Change of Correspondence firm (having as a member a registered attorney or Address form PTO/SB/122) attached. agent) and the names of up to 2 registered patent 1 "Fee Address" indication (or "Fee Address" Indication form attorneys or agents. If no name is listed, no name PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer will be printed. 3. Number is required.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

TITLE OF INVENTION: METHOD FOR PRODUCING 2.5-DIMETHYLPHENYL ACETIC ACID

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(B) RESIDENCE (CITY and STATE OR COUNTRY)

ARCHER-DANIELS-MIDLAND COMPANY DECATUR, ILLINOIS

Please check the appropriate assignee category or categories (will not be printed on the patent): |] individual [X] corporation or other private group entity |] government

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Publication Fee (No small entity discount permitted) Payment by credit card. Electronically Filed. [X] The Director is hereby authorized to charge any deficiency in the required fee(s), or credit any overpayment, to Deposit Account Number 19-0036 (enclose an extra copy of this form). Advance Order - # of Copies __

5. Change in Entity Status (from status indicated above)

[].a. Applicant claims SMALL ENTITY status, See 37 CFR 1.27. []b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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(Authorized Signature) (Date) _____ July 2, 2009 Typed or Printed Name Cynthia M. Bouchez Registration No. 47,438

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